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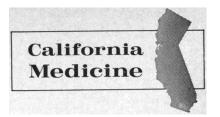
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## **EDITORIAL**

## Hemolytic Disease of the Newborn

ELSEWHERE IN THIS ISSUE appears the first of a series of papers concerned with a recently completed study of hemolytic disease of the newborn (HDN) in California. This study has been one of the ongoing projects of the Committee on Maternal and Child Care of the California Medical Association, in conjunction with the California State Department of Public Health, and is essentially an extension of the reports on maternal mortality which have been the major activity of this collaboration for the past several years.

The present study is unique in that it has assayed every HDN death occurring in California over a two and a half year period, involving every part of the state, every type of hospital, every economic class, every ethnic and social group and every level of medical care available, as concerned with this disease. The active participants numbered in the hundreds; the review committees alone included, at one time or another, general practitioners, obstetricians, pediatricians, anesthesiologists, pathologists, hematologists and public health physicians. Also involved were hospital administrators, house officers, nurses, laboratory technicians, blood bank personnel and social service staffs. To the credit of all concerned it must be

documented that cooperation was rendered most willingly, and was complete in all respects.

The results of the study will be utilized in the continuing medical education activities of the CMA and the State Department of Public Health. Already one panel discussion and a scientific exhibit have been presented at the annual CMA session. Plans for further use of the study findings include additional papers on selected aspects of the study (such as first infant involvement), continued postgraduate education in HDN at state, county and local hospital levels, and lay education through CMA Health Tips and other media.

It is hoped that the study will focus the attention of physicians, hospitals and paramedical facilities not only on hemolytic disease of the newborn, but also on the general problems of antenatal care, resources and responsibilities of hospitals and hospital facilities, availability of consultative services, role of teaching hospitals, medical staff interrelationships, and staff committee functions and responsibilities in general hospitals.

It must be emphasized and reemphasized that the evaluation of possible "preventability" or "avoidability" in this study was based upon assessment against the absolutely ideal level of management. This was a condition of the study; it was not intended to set punitive or accusative standards. It is acknowledged that the perfect ideal cannot always be attained, but in efforts to lower infant mortality and morbidity we all are charged with seeking the ideal.

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